



1755

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## REQUEST FOR WITHDRAWAL AS ATTORNEY OR AGENT

Application Number	10/038,761
Filing Date	December 31, 2001
First Named Inventor	Reeves
Group Art Unit	1755
Examiner Name	
Attorney Docket Number	11710-0300 (44040-263112)

RECEIVED  
JUL 09 2003  
GROUP 1700

To: Commissioner for Patents  
PO Box 1450  
Alexandria, VA 22313-1450

I hereby apply to withdraw as attorney or agent for the above identified application.

The reasons for this request are: Conflict of Interest

Approved NOV 30 2004

*Signature*  
Jacqueline M. Stone, Director  
Technology Center 1700

1. ☐ The correspondence address is NOT affected by this withdrawal.

2. ☒ Change the correspondence address and direct all future correspondence to:  
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Kimberly-Clark Worldwide, Inc.

Address

Legal Department

Address

401 North Lake Street

City

Neenah

State

WI

ZIP

54956

Country

USA

Telephone

920-721-2000

Fax

☒ This request is made on behalf of myself and

☐ all the attorneys/agents of record,

☒ the attorneys/agents (with registration numbers) listed on the attached paper(s), or

☐ the attorneys/agents associated with Customer Number

This request is enclosed in triplicate (including any attachments).

Name

Robert E. Richards - Reg. No. 29,105

Signature

Date

NOTE: Withdrawal is effective when approved rather than when received  
Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for  
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